

CONTROLLED DOCUMENT INSTRUCTION/TRANSMITTAL FORM

Name: Danita Howe To: Distribution Organization: Nuclear Operations Location: Building 111 Page 1 of 1 Telephone: 3602 Date of Transmittal: Title of Manual: CONDUCT OF OPERATIONS MANUAL June 29, 1999 MAN-066-COOP Insert Remove DCF-001 IN FRONT OF MANUAL REPLACE AND RECYCLE AFFECTED PAGES

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Please Note-

This procedure is not effective until 8-18-1999

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Item Page	E Step	DynCorp replaced by		l Modification
				:-1)
2 15	Line 6	_	n to Site Closure Project (editor	
4 23	Lines 4 & 6	Added: Observing AB requirements and working to procedures when required; added Site SAR		
5 31	Line 10	Added: Sitewide appli	cation (editorial)	
6 31	Lines 13-23	Added: requirements	for deactivation, D&D, and JH-9	88 drum movement; LO/TO; reviewing hazards
®		recognition; emphasiz	ring procedural compliance and	
Items 1, 2, 3, 5, 7, 11, 1	2 14 22 23 24 and	1 27 are editorial	Jus changes to keep the manual cur	tification
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Items 4, and 24	-	. ,	ting to reflect the new Site SAR	
Items 6, 8, 9, 10, and 25 make improvement to Pre-Evolution Briefings requirements to meet Acti PAAA Report NTS-RFO-KHLL-SITEWIDE-1998-002, SITE-WIDE HAZA and the March 1, 1999 Criticality Safety Performance Review Team Fina				
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(15) Reviewing Organization	(16) Name of Rev		(15) Reviewing Organization	Name of Reviewer D
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Page 2 of 2 DCF (continuation sheet) DCF#: DCF-001						
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Site Conduct of Operations Manual, DCF-001 MAN-066-COOP, Revision 0						
Document Title MAN-066-COOP Existing Document Number and Revision						
<u>10)</u>	① 2	(12)	(3) Decrease Modification			
Item 7	Page 31	Step Line 26	Proposed Modification Added: consistent with Paragraph C. above (editorial)			
8	32	Line 13	Added: and system deactivation			
9	33	Line 10	Added: Parts 17, 28, 29			
10	33	Line 17	Added: and review lessons learned for similar work			
11	39	Line 1	Changed to: Housekeeping should be performed as an integral part of routine work (editorial)			
12	47	Line 24	Added: alarm response (editorial)			
13	48,49	All	Removed reference to procedural equivalence; added Operations Orders to be developed also in accordance with Chapter 7 of IWCP requirements; emphasized Operations Orders not to be used when IWCP or procedures are to be used; added annual review of Operations Orders; added annual review requirement for Standing Orders; limited duration of Standing Orders to three years			
14	50	Line 5	Removed VP SS&E which no longer exists (editorial)			
15	51	Line 7	Limited expiration to a maximum of 36 months			
16	53	Line 15	Added: requirement meet IWCP Chapter 7 requirements when creating the Operations Order			
17	54	Line 13	Added: annual review for Operations Orders			
18	62	Line 8	Added: monthly review of Shift Orders			
19	73	Line 21	Added: registered refrigeration systems			
20	94	Lines 4-7	Changed filing surveillance requirements to one year; shiftly to six months			
21	94	Line 14	Added: OS & IH Manual (editorial)			
22	105	Line 3	Update: reference document (editorial)			
23	109	Line 13	Added: Appendix 28 (editorial)			
24	123-124	Several	Updated references including adding Site SAR (editorial)			
25	130-132	Several	Updated the PEB record to match the changes written into Section 4.C. and to emphasize criticality safety			
26	197	Lines 15-16	Added: IWCP Program Manual Chapter 7 requirements for development			
27	177, 178, 179, 181, 182, 184, 185, and 186		Updated references and corrected typographical errors in Revision 0 (editorial)			
28	2		Updated List of Effective Pages to reflect DCF-001			
Item Justification		7 40 00	Justification			
Items 13, 15, 16, 17, 18, 26			make improvement to Shift Orders, Operations Orders, and Standing Orders to meet Corrective Action Plan Item 9 from the March and April 1999 Focused Safety Management Evaluation of the Rocky Flats Environmental Technology Site report by the Office of Environment, Safety and health (EH) (June 1999); and to incorporate IWCP Program Manual requirements when creating Operations Orders which was an action from the February 1999 Sitewide IWCP Assessment Report Number 99-0073-KH and the above EH report.			
Item 19 reflects log requirements for registered refrigeration systems in the OS & IH Manual changed the filing requirements for surveillances						

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The following changes are active for this document:

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and pre-evolution briefing requirements have been enhanced in this revision in order to Finally, this facilitate implementation of ISMS on the floor. Refer to 1-MAN-016-ISM, Integrated Safety Management System Manual, for additional ISMS information.

Finally, this revision reduces administrative requirements, and recognizes the change in organization from a Management and Operating Contractor to an Integrating Management Contractor (IMC) and principal subcontractors (PSCs). The IMC is Kaiser-Hill Company, L.L.C. (Kaiser-Hill), and the four principal subcontractors are Rocky Flats Closure Site Services, L.L.C. (RFCSS), Rocky Mountain Remediation Services, L.L.C. (RMRS), Safe Sites of Colorado, L.L.C. (SSOC), and Wackenhut Services, L.L.C. (WSLLC).

Because this Manual sets forth requirements for Site facilities and organizations with different missions and organizational structure, logical interpretations must often be made. For instance, where the Facility Manager's responsibility is described, organizations which do not have Facility Managers interpret the title as, "Facility Manager or equivalent line management." Also, tasks or responsibilities assigned to positions such as Shift Manager (SM) or Shift Technical Advisor (STA) must be assigned to appropriate personnel in organizations not having SM/STA positions or which use different terminology for an equivalent position (such as Configuration Control Authority). Managers of facilities affected by this SHALL assign these responsibilities to the appropriate positions using directives such as procedures, Operations Orders, or other documents. Clearly defined responsibilities are essential for contributing to safe operations as facilities undergo complex and often hazardous activities associated with closure.

D. Implementation Requirements

Because there have been numerous organizational, structural, and mission changes affecting operations and support organizations since July 1, 1995, and since there will be continuing change as companies pursue closure of RFETS, it is necessary for operations and support organizations to update and submit their Conduct of Operations Matrix of Applicability. Accordingly, operations and support organizations are required to

update and submit (to the Kaiser-Hill Conduct of Operations Program Manager), their Rocky Flats Graded Approach Matrix of Applicability by September 30, 1998. This will also be tasked separately by letter as the Manual is distributed. Achievement of implementation for this revision includes making changes to documents, forms, and records in use which change due to this revision. It is required that facilities and organizations revise their Conduct of Operations related documents, forms, and records to comply with this revision by December 30, 1998. Each company will assess implementation of this revision by December 30, 1998. One exception is that ISMS requirements (pre-evolution briefing, job task briefing, and POD requirements) must be implemented by September 30, 1998.

Project Managers involved in closure activities **Should** include a milestone in Project Plans to require revision/update and submission of the affected Rocky Flats Graded Approach Matrix of Applicability when major organization changes, AB changes, or hazard reductions occur.

E. Disposition of Records

A number of quality assurance records are generated and retained as a result of requirements in the Manual. They are retained and subsequently dispositioned in accordance with 1-V41-RM-001, Records Management Guidance for Records Sources. Retention requirements vary, and are included in individual Manual sections.

2. RESPONSIBILITIES

A. Integrating Management Contractor (IMC) President

- maintains responsibility for overall operation of RFETS
- approves RFETS Conduct of Operations policy

- conducts counseling, training, and when necessary, disciplinary measures, to promote personal accountability
- promotes self-assessment at all levels, and continuous improvement as a matter of routine

F. Facility Manager (FM)

Since organizational changes will occur as the Site Closure Project is pursued and major risks/hazards are reduced, the responsibilities indicated for FM, SM, and Shift Technical Advisor (STA) may become the responsibility of another job position/title, or may become unnecessary. It is recognized that Conduct of Operations requirements will change with the mission, and will be discontinued in many facilities when hazardous operations and activities have been concluded. For example, it is expected that SM/STA responsibilities may be combined into one position (Configuration Control Authority) as facility missions and organization structures change. Accordingly, each affected organization SHALL promulgate which positions in the organization have the responsibilities indicated in Sections 2.F through 2.H.

The Facility Manager:

- ensures compliance with Authorization Basis (AB) requirements
- ensures that operations are performed in accordance with appropriate procedures
- ensures that procedures are developed and implemented for operational activities
- ensures that operator aids, logs, round sheets, lockout tags, caution tags and information tags are implemented and controlled in accordance with Manual requirements

- ensures that the POD is managed in order to achieve effective and productive use of resources
- approves the POD
- maintains authority over tenant organizations working in respective facilities, for scheduling of tasks, and compliance with Conduct of Operations requirements
- attends POD meetings, fact finding meetings, and work planning meetings regularly
- approves operations related documents as required by individual sections of this
 Manual (Operations Orders, temporary modifications, etc.)
- ensures that positions requiring shift relief and turnover are identified
- ensures that status display requirements are identified and implemented
- ensures that the required quality assurance records are completed and maintained
- ensures, on an ongoing basis, that personnel understand and follow safety requirements and practices
- approves facility unique procedures. Authorizes implementation of multibuilding/location technical procedures per MAN-001-SDRM, Site Documents Requirements Manual, and establishes a method to regularly communicate to operations personnel important information about new and/or revised manuals and procedures used in the facility
- ensures control of facility visitors in accordance with Training Users Manual requirements, and Security Manual requirements

activity in facilities. Operations and support personnel responsibilities include the following:

- being knowledgeable of system and equipment status when conducting operations or other work; observing AB requirements, and working to procedures when required
- observing activities and conditions in the work area and reporting problems, anomalies, upsets, and requirement non-compliances (*including the Site SAR*) to the SM
- maintaining status displays at work stations if required by the FM
- taking the necessary immediate action in an emergency in order to ensure personnel, facility, and environmental safety without obtaining prior approval, and then reporting to the SM
- ensuring that shift relief and turnover where required, is thorough, complete, and documented
- ensuring that operational communications are clear, concise, and accurate
- if assigned, frequently monitoring control panels for which responsible, and being alert and attentive to control panel indications and alarms
- ensuring that round sheets and logs are complete, accurately reflect the conditions observed and actions taken, and that tours are thorough and complete
- ensuring that deficiencies noted when conducting Authorization Basis surveillances and operations are promptly reported to the SM
- operating equipment at their work station for which they are responsible

- ensuring that responses to alarms and anomalies are accomplished as required by procedures, that they are documented, and that they are promptly reported to the SM
- ensuring that as a matter of routine, good housekeeping is observed, that
 combustible loading requirements are met, that hazardous materials are not
 introduced into unauthorized areas, that As Low As Reasonably Achievable (ALARA)
 principles are observed, and that postings are observed
- ensuring that when conducting work, the hazards are understood, the required controls are utilized, and that the work has been authorized on the POD
- ensuring that work about to be commenced has been authorized to start by the SM

K. Personnel Entering Operational Facilities

- personnel entering operational facilities where work is controlled by the POD SHALL obtain permission of the SM (or equivalent operational authority) before commencing work
- visitors, as defined in the Training Users Manual, SHALL check-in with the SM upon entering. For facilities without a SM or equivalent, they check-in with the FM
- personnel accessing nuclear facilities are required to satisfy the minimum training requirements based upon access to nuclear facilities and Radiological Buffer Area/Material Access Area (RBA/MAA) as specified in the Training Users Manual, or will be escorted

3. INSTRUCTIONS - GENERAL

- notify the FM if scheduled POD activities cannot be conducted, and initiates action with functional managers to shift personnel to other assignments
- maintain the master copy of the POD

Personnel desiring activities to be scheduled **Should** submit a completed Evolution Request Form or equivalent request with sufficient lead time for inclusion of the evolution on the POD. (See Appendix 3, Evolution Request Form).

Personnel requesting non-routinely conducted activities to be placed on the POD **Should** attend the POD meeting to provide information about the activities.

C. Pre-evolution Briefings (PEBs) and Job Task Briefings (JTBs)

Pre-evolution Briefings (PEBs) and Job Task Briefings (JTBs) apply Sitewide and are performed to ensure that personnel preparing to conduct operations and other work understand what is to be performed, understand the hazards and controls, and have an opportunity to ask questions or raise concerns. The PEB is more formal and is done for non-routine work, deactivation, decomissioning, destruction/dismantlement work, and all JH-98 drum movements. It is also required for all new work involving lockout/tagout. It is a forum for accomplishing ISMS safety functions at the floor level. The PEB provides for feedback as well as for reviewing the scope of work, reviewing hazards recognition and the controls to do the work safely. It is also a point in the work process to confirm that the required prerequisites are in place. A JTB is less formal than a PEB, is conducted by the foreman with the workers involved, and serves as one method by which the ISMS process is implemented on-the-floor for noncomplex, routine, and low hazard work activities. A PEB is documented; a JTB does not have to be documented. All PEBs and JTBs emphasize procedural compliance, and stop work authority.

(1) Evolutions Requiring a PEB

The following evolutions, as applicable to the scheduled work, **SHALL** be evaluated at the POD for having PEBs conducted consistent with Paragraph C. above:

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- radioactive decontamination
- maintenance on systems which contain radioactivity
- startup of all new process or mission program activities
- conducting mission program activity
- experiments and tests
- non-routinely conducted work requiring special personnel protective equipment
- shipment, transfer, or inventory of fissile materials, including movement of drums containing radioactive material
- maintenance work packages which involve Safety Structures, Systems, and
 Components (Safety SSC), involve welding or cutting, confined space work, or work on energized electrical equipment
- construction work
- demolition and facility decommissioning work, and system deactivation
- non-routine work with chemicals
- non-routine work with hazardous substances
- infrequently conducted operations, surveillances, maintenance, and preventive
 maintenance activities that operate equipment or systems, or have hazards
 associated with conducting the activity, or involve multiple trades and multiple
 subcontractor personnel who have not worked together frequently

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- LCO surveillances conducted monthly or less frequently
- · recovery actions/reentry actions when recovering from an upset condition
- other items as required by the facility Authorization Basis
- other items for which a PEB is scheduled on the POD

For regularly occurring operations (e.g., nearly daily) which have become routine (Caustic Waste Treatment, Salt Stabilization, Dry Repack, etc.), the FM may elect to do one comprehensive PEB at the start of the week and then do shortened PEBs the remainder of the week. The shortened PEBs would concentrate on hazards, controls, and recent problems or issues. Documentation requirements are the same, except only Parts A, B, C, 6, 8, 9, 17, 23, 26, 28, 29, 34, and 35 of Appendix 4 need to be covered.

The SM or other designated manager **Should** attend PEBs for complex evolutions. This **Should** be decided at the POD meetings. The Evolution Supervisor conducts the PEB.

(2) Preparation for the PEB

The Evolution Supervisor prepares for the PEB as follows:

- takes action as necessary to elicit information from subject matter experts (SMEs) and workers to obtain the benefit of the Enhanced Work Planning process which planned the evolution, and reviews lessons learned for similar work
- schedules the PEB on the POD, and coordinates with the SM to identify and evaluate
 the impact of the activity on other activities in the facility ongoing concurrently, and to
 evaluate ongoing activity impact on the planned evolution

- identifies resource support needed for the evolution (RCT, NMC, security, etc.), and identifies the number of trainees to be involved
- verifies that procedures to be used for the activity are current
- conducts a walkdown prior to the evolution if not previously accomplished through dry-runs and evolution training
- conducts the PEB as close as practicable to the start of the evolution, notifying participants of the PEB and evolution start time in advance
- if practical, conducts the PEB at or near the actual evolution site
- ensures that RWPs and other work permits will be in place, and that 4-B19-NSM 03.12, Nuclear Material Safety Limits and Criticality Safety Operating Limits Validation, if required, is scheduled and that the results will be reported to the Evolution Supervisor prior to activity start
- ensures that appropriate personnel involved in the evolution have their copy of procedures prior to the PEB
- ensures that all personnel performing the evolution, personnel who may be affected
 by the evolution, and all trainees involved attend the PEB. This is especially
 important when multiple disciplines or companies are involved. The Evolution
 Supervisor may brief selected individuals separately if necessary
- uses Appendix 5, Hazardous Material Release Prevention/Preparedness Checklist, if applicable, in order to:

planned to be in place for a short period. They include electrical jumpers, lifted leads, pulled circuit boards, disabled annunciators/alarms, mechanical jumpers/bypasses, temporary set-point changes, installation or removal of blank flanges, disabled relief or safety valves, installation or removal of filters or strainers, plugging of floor and other drains, temporary pipe supports, and items of a similar nature. Although planned to be temporary, TMs may stay in place indefinitely if considered appropriate by management based on such considerations as facility life, cost, or need. TMs can therefore remain in place as long as the safety evaluation screens conducted when extending them do not indicate otherwise.

Individuals desiring to make a temporary modification initiate the process by filling out an IWCP form and processing it for work package development and review, and safety evaluation screen in accordance with the requirements of the Integrated Work Control Program Manual. TMs which are part of design packages are prepared according to 1-V51-COEM-DES-210, Design Process Requirements or its replacement Site Engineering Requirements Manual (SERM), MAN-027-SERM. In either case, the IWCP/design package is processed, and the affected facility contacted to initiate the TM administrative process. TMs are administered by the affected facility. The requesting individual initiates action by completing the Temporary Modification Request Form, Appendix 6. The Facility Engineering Manager determines the expiration date. Temporary changes resulting from a step in a surveillance procedure, and which are returned to normal in the surveillance procedure, are excluded from the requirements of this section. Similarly, changes which occur as a step in an operating procedure that are returned to normal in the operating procedure, are excluded from the requirements of this section.

After the top half of Temporary Modification Request Form is filled out, the TM is safety evaluation screened, reviewed by the SM, concurred in by the Facility Engineering Manager, and approved by the FM. The FM determines if training or procedure changes are necessary based on the type of the TM. Appendix 8 is a TM Tag Sheet and instructions for preparation of a TM Tag Sheet and TM tag. Appendix 10 shows a TM tag.

Housekeeping Should be performed as an integral part of routine work.

Operators, support personnel, and other personnel **Should** take appropriate action to correct and/or report deficiencies when found. Appropriate log or round sheet entries are made, and Integrated Work Control Program (IWCP) corrective action initiated as necessary.

E. Abnormal Events and Emergencies

In the case of abnormal events, one primary concern is operation of the facility within the Authorization Basis. Personnel take appropriate emergency actions if there is an immediate threat to health, the facility, or the environment and report actions taken to the SM at the earliest possible time. In an emergency, operators may take whatever action is necessary to place the facility in a safe condition, and to protect equipment, personnel and public safety, and the environment.

If an abnormal condition is not an emergency, or if personnel on scene cannot take corrective actions, the condition **SHALL** be immediately reported to the SM, who will coordinate control of the condition.

Circumstances, such as occurrences, concerns, conditions, or events which could have a negative impact on safety **SHALL** receive an appropriate response including identification, notification, categorization, investigation, evaluation, tracking, trending, and corrective action. Occurrences are categorized, reported and administered in accordance with 1-D97-ADM-16.01, Occurrence Reporting Process.

F. Temporary Modification Control

Temporary Modifications (TM) are changes thought to be of a temporary nature (less than six months) to systems, structures, and components which are minor in scope and

consequences of error. Procedures are developed and controlled in accordance with the requirements of MAN-001-SDRM, Site Documents Requirements Manual.

Operations procedures **SHALL** provide for component alignment checklists for start-up. They **SHALL** also, where applicable, specify component positioning to accomplish both short-term and long-term shutdown. Component positioning to start-up a system for the first time or following an extended shutdown for maintenance may be accomplished by a component lineup and verification. In this case, personnel conduct the two independent of each other. When performing a lineup to start-up a system, the normal practice is to have the first individual position the components as specified in the alignment checklist, unless the SM has directed otherwise due to operational considerations. The second individual (if used) verifies that the components are correctly aligned. Both initial the alignment checklists and the SM reviews the checklist when completed. In the case where the SM directs that items not be positioned during the lineup, their position is verified instead. Verification is discussed in Section 7.H, and verification techniques are in Appendix 30. Alignment checklist retention requirements are in Section 7.A.(3).

(1) Use of Procedures

The manner for procedure use is governed by Procedure Use Categories. There are three categories. The three categories are defined in the SDRM. The category is assigned by the responsible manager developing the procedure to identify the manner of use commensurate with the complexity and risk associated with the activity. All procedures are required to be performed as written.

Employees are required to use and comply with applicable procedures.

The FM ensures that procedures are prepared, approved, and used for operations, surveillances, tests, alarm response and emergencies within assigned facilities.

The FM implements Site level and company level procedures in the facility as required by the Site Documents Requirements Manual.

Managers responsible for controlling the use of procedures **SHALL** ensure the procedures are controlled to preclude the use of outdated copies by complying with MAN-0063-DC, Site Document Control.

FMs **SHALL** have an administrative process established (such as an Operations Order or procedure) which will provide for conveying information to facility personnel about manual and procedure changes, and new manuals and procedures used in the facility, and for determining and conducting necessary training.

When instructions or procedures contain sign-offs for steps of an activity or they are Use Category 1, they **SHALL** be completed in a step-by-step manner. For any category of procedures where following in a step-by-step manner may not be necessary, the procedure **Should** clearly indicate the steps or sections where this is the case.

If a procedure step cannot or should not be performed as written, or if following the procedure will create an unsafe or noncompliant condition, the performing individual **SHALL** stop, place the system or component in a stable and safe condition, and immediately inform the evolution supervisor and the SM.

Procedures are to be revised in a timely manner if they are found deficient.

Operators may take whatever action is necessary during emergency conditions to place the facility in a safe condition, and to protect equipment, personnel, and public safety without first administering a procedure change.

D. Standing, Operations, and Shift Orders

This section establishes Standing orders, Operations Orders, and Shift Orders. Shift Orders and Operations Orders satisfy the DOE Order 5480.19 requirement to provide timely information and instructions to operators.

Standing Orders are documents which provide guidance or direction applicable Sitewide when rapid dissemination is considered necessary by senior management. Standing Orders are not intended to provide technical direction for operation of specific systems. Standing Orders may be in effect for up through three years. They are to be reviewed annually by the responsible manager or designee to determine if still applicable and current.

Operations Orders are either administrative or technical. Administrative Operations Orders may be effective for twenty-four (24) months, and contain information about operations, administrative matters, work priorities, and matters of a similar nature. Administrative Operations Orders which contain information intended to be permanent **Should** be incorporated into administrative procedures or instructions. Technical Operations Orders may direct manipulation of systems or prescribe requirements which affect technical matters. They receive the same reviews as procedures and are developed meeting the Integrated Work Control Program Manual, Chapter 7 requirements. Technical Operations Orders may be effective for thirty-six (36) months and are to be reviewed annually by the Facility Manager or designee to determine if still applicable and current. Interim Technical Operations Orders can be effective for sixty (60) days. Technical Operations Orders are not considered appropriate for conducting operational activities of a sustained nature. Instead, procedures and IWCP work packages are to be used, as applicable. They may not be used to modify or revise existing procedures.

Shift Orders may be effective for thirty (30) days and are similar to Administrative Operations Orders in that they address the same kinds of topics, but they serve as a means for operations management to quickly communicate short-term information and administrative instructions to operations personnel.

When promulgating Shift Orders and Operations Orders, the FM is responsible to provide for training or required reading for affected personnel.

Since Standing Orders, Operations Orders and Shift Orders are widely available, they **Should** be reviewed for classification prior to promulgation, if appropriate.

(1) Standing Orders

Standing Orders are prepared using the format of Appendix 12.

Standing Orders are approved by the IMC Chief Operating Officer, the Vice President of Nuclear Operations, the Vice President of Safeguards, Security, Site Operations and Integration, or the Vice President of Closure Projects Integration as appropriate for the subject.

The Vice President of Nuclear Operations designates a Principal Standing Order Administrator (PSOA). This individual normally will be an employee of the Site Conduct of Operations Program Manager. The PSOA identifies copyholders for Standing Orders. The Shift Superintendent will be one of the copyholders for Standing Orders.

When the need for promulgating a Standing Order has been identified, the Responsible Manager writes the Standing Order.

Standing Orders which specify how technical requirements are met, affect activity or work in nuclear facilities, involve Site work that could affect a nuclear facility, or involve worker safety, public safety, or the environment may require Independent Safety Review.

Accordingly, the Responsible Manager consults 1-52000-ADM-02.01, Operations Review Requirements to determine if the Standing Order requires Independent Safety Review. If review is required, review evidence is maintained by the PSOA in the history file.

The Responsible Manager responsibilities are to:

- review the draft with the General Counsel for concurrence
- consult 1-52000-ADM-02.01 as indicated above if necessary

- determine which organizations/individuals need to review the Standing Order prior to issue
- obtain the approval signature
- assign an effective date that accounts for distribution, training, and implementation if necessary
- determine training and/or implementation actions if necessary
- assign an expiration date up through thirty-six (36) months from the effective date
- provide the approved Standing Order to the PSOA for processing and distribution through Document Control
- oversee distribution to the Shift Superintendent and affected organizations, and through Document Control in a time frame relevant to its urgency
- initiate extensions and revisions if necessary. Revisions are prepared following the same steps for new ones

The PSOA SHALL:

- maintain a Standing Orders Manual and Standing Orders History File in accordance with MAN-001-SDRM (this is in addition to the file maintained in Document Control)
- provide Standing Order sequential numbers

- file the master copy of Standing Orders in the Standing Orders Manual, and a copy in the two history files
- ensure distribution of the Standing Order through Document Control in accordance with MAN-001-SDRM, Controlled Distribution section

When a Standing Order is to be canceled, the PSOA SHALL:

- obtain Responsible Manager concurrence, provide a copy to the approval authority
 who approved the Standing Order with a diagonal line across the title page labeled
 CANCELED and a space for signature and date of the approval authority, and obtain
 his/her signature
- update the Table of Contents in the Standing Orders Manual to reflect the cancellation and date of the cancellation
- provide a revised Table of Contents of the Standing Orders Manual to Document
 Control for distribution
- place the master copy of the canceled Standing Order in the two Standing Orders
 History Files. The PSOA marks it with a diagonal line and the word CANCELED, and attaches the approval authority's signed cancellation copy to the master

For Standing Orders requiring revision or extension, the PSOA **SHALL**:

- revise the Standing Orders Manual Table of Contents to reflect the revision or extension, and the date
- provide the revised Table of Contents and the revised or extended Standing Order to Document Control for distribution

update the history files

The PSOA **SHALL** review Standing Orders monthly to identify those Standing Orders which will soon expire, and have the Responsible Managers determine if expiration, cancellation, or extension is appropriate.

(2) Operations Orders

The Facility Manager SHALL:

- designate a Shift Order Administrator (SOA) to maintain the organization's Standing Orders Manual, and to administer the Shift and Operations Orders Manual and the Operations Orders and Shift Orders History Files, and designate copyholders
- designate qualified staff member(s) to review proposed Interim Operations Orders if reviewed by staff other than qualified SM and STA, or the Engineering Manager for the facility
- evaluate the need for an Operations Order using Appendix 13 and designate the type, and have it prepared using the Appendix 14 format, and the requirements of the IWCP Program Manual, Chapter 7
- review 1-52000-ADM-02.01, Operations Review Requirements, to determine if
 Independent Safety Review is required. Submit for review if required
- complete Appendix 13 to determine if an Operations Order is Administrative,
 Technical, or Interim Technical
- have Technical Operations Orders in nuclear facilities be USQ Safety Evaluation screened
- · resolve review comments

- for Operations Orders intended to be a temporary document pending replacement by procedure, check the Convert-to-Procedure box on the Operations Order; otherwise, mark N/A in the Date and Assigned Manager sections
- based on the Appendix 13 evaluation, for Operations Orders determined to be
 Technical, check the Technical box in the Category section on the Operations Order,
 and determine if the need for the Order is urgent enough that it be implemented
 before the review cycle is completed
- for Operations Orders determined to be Administrative, check the Administrative box in the Category section on the Operations Order
- list the groups required to read the Operations Order in the Required Reading line provided
- approve Operations Orders by signing/dating in the "Approved by" section
- review Technical Operations Orders annually to determine if still applicable and current. A designee may be assigned this action

NOTE

Situations requiring urgent action through an Interim Technical Operations Order to mediate concerns, such as safety, criticality, safeguards, or security, require coordination with the appropriate disciplines

- for Technical Operations Orders urgently needed:
 - mark <u>yes</u> in the Interim Operations Order box in the Categorization section
 - check the Interim box in the Category section on the Operations Order

- issue copies of the Shift Order and the revised Table of Contents to copyholders
- place copies in Required Reading as directed

When a Shift Order is to be canceled, the SOA SHALL:

- submit the Shift Order to the FM for cancellation with a diagonal line across the title page labeled CANCELED and a space for FM signature and date
- revise the Shift and Operations Orders Manual Table of Contents to reflect the cancellation and date of the cancellation. This may be done by drawing a line through the entry and signing/dating the line
- distribute a revised Table of Contents to the copyholders of Shift and Operations
 Orders Manuals. This serves as notification for copyholders to discard the canceled
 Shift Order
- place the canceled Shift Order in the history file, and in Required Reading

When a Shift Order requires revision, the SOA SHALL:

- obtain a rewrite of the Shift Order from the FM or applicable manager
- prepare and issue the revised Shift Order using the steps above for processing a new Shift Order
- revise the Shift and Operations Orders Manual Table of Contents to reflect the revision and revision date. This may be done in pen/ink
- place a copy in the history file

- distribute the revised Table of Contents and the revised Shift Order to the copyholders. This serves as notification for copyholders to discard the superseded copies
- place copies in Required Reading as directed

When a Shift Order requires extension, it is processed and issued as above under the same order number but with a new revision number and a new expiration date.

The SM SHALL:

 review Shift Orders at least monthly to determine the need for cancellation or extension, and notify the SOA to take action if necessary

(4) Records

The following Quality Assurance Records are generated by this section. These Quality Assurance Records **SHALL** be maintained by the SOA in accordance with 1-V41-RM-001, Records Management Guidance for Records Sources, for two years:

- Operations Order Evaluation Checklists
- Standing Order History Files
- Operations Order History Files
- Shift Order History Files

After 2 years, disposition the records in accordance with 1-V41-RM-001, Records Management Guidance for Records Sources.

- Equipment status including:
 - operating
 - standby
 - shutdown
 - out-of-service or out-of-commission
- maximum, minimum, normal values, or expected readings of key parameters as appropriate
- a section to write comments for information gathered during the performance of the round. Comments may include items listed in Appendix 19 such as equipment vibration, excessive temperature, unusual noise or smell, and documentation of supervision notification

(3) Requirements for Logs and Round Sheets

The FM **SHALL** determine the logs and round sheets used in the facility. Logs used in the facility include the following where applicable:

- narrative logs
 - Shift Manager
 - Shift Technical Advisor
 - Stationary Operating Engineer
 - Radiological Operations
 - Mission Program Activity Evolution Supervisor if required by project plans
 - others, such as fire watch, and IWCP emergency repair, registered refrigeration systems, as required

- administrative logs
 - Lockout/Tagout Permit Log
 - Alarm Deactivation Log
 - Operator Aid Postings Log
 - Temporary Modification Log

The FM **SHALL** maintain an Operations Order or procedure listing the required logs and round sheets for the facility. For nuclear facilities, the logs and round sheets specified in the Authorization Basis are also maintained. The content of round sheets is approved by the FM by approval of the promulgating Operations Order or procedure.

The FM specifies frequency of tours (rounds) associated with each watch position or required round sheet. Regulatory requirements (RCRA), radiological concerns (ALARA), equipment conditions, or AB requirements may influence tour frequency.

Prior to implementing the use of computerized narrative logs, the FM:

- considers the handling and security of the recorded data
- establishes requirements for computerized narrative logkeeping commensurate with the controls applied to manual logkeeping
- provides guidance for log corrections, late entries, supervisory review of log entries, and future changes once approved by supervision

Log keeping requirements are:

- entries are to be recorded promptly
- entries are to be complete and legible

- review the form for completeness and sign the Compliance Tracking Form
- update the Compliance Tracking System to reflect the surveillance/compensatory measure performance

(6) Closure of EOEs, JCOs, and USQ/USQD

The FM or designated manager (Authorization Basis Manager, Engineering Manager) responsibilities are to:

- determine that a system, component, or equipment is operable in accordance with Section 7.G. of this Manual, or that the conditions which initiated the EOE, JCO, or USQ/USQD no longer exist
- notify Engineering, including IMC Nuclear Engineering, Nuclear Safety, and Criticality Safety in writing that applicable EOEs, JCOs, or USQ/USQDs are no longer required so that the Authorization Basis Document List for the facility can be kept current
- notify the CTC of this in writing and specify discontinuation of performing and tracking applicable surveillances or compensatory measures
- notify the DOE Facility Representative, and the Engineer of the IMC organization that oversights the facility so that the DOE, RFFO Authorization Basis Division can be informed

The CTC **SHALL** update the Compliance Tracking System accordingly, and notify the performing organization of the change.

(7) Records

Compliance Tracking Forms generated by this procedure are Quality Records.

The CTC:

- maintains the original Compliance Tracking Form and attached data sheets for one year, except shiftly surveillances which are kept for six months. For surveillances conducted less frequently than a year, maintain the previous one on file
- after six months or one year as applicable, dispositions the records in accordance with 1-V41-RM-001, Records Management Guidance for Records Sources

D. Lockout/Tagout (LO/TO), Caution Tag, and Information Tag Requirements

The LO/TO program provides administrative control to protect personnel from injury, protect equipment from damage, ensure operation of items only by authorized personnel in a controlled fashion when necessary, and to maintain integrity of physical boundaries of facility systems. LO/TO is implemented in accordance with 1-15320-HSP-2.08, Lockout/Tagout, or its successor, Chapter 9 of the Occupational Safety & Industrial Hygiene Program Manual.

Caution Tags are used as a precautionary measure to provide temporary special instruction or to mandate that greater than normal caution should be exercised to operate equipment.

Information Tags are used to provide explanatory information about a component or system. The information is not essential to safe operation and is of less significance than information provided on a Caution Tag.

Both the Caution and Information Tag systems are optional, and are implemented at the discretion of the FM.

continues normal operations and makes the appropriate SM Log entry

Submission of a Technical Concern may result in processing an EOE in accordance with PRO-393-SERM-EOE, Engineering Operability Evaluation Report Process. The identification of a Technical Concern and request for an EOE is based on a reasonable expectation that the Technical Concern or EOE will conclude that the affected Safety SSC is operable.

When a reasonable expectation does not exist that the affected Safety SSC will be deemed operable, the Shift Manager:

- declares the item inoperable
- initiates remedial/required actions until a formal determination is made or the deficiency is repaired
- makes the appropriate SM Log entry
- updates status and informs managers and facility personnel

If a timeframe for initiating remedial/required actions is not specified in the Authorization Basis, action is initiated within thirty (30) minutes.

The Engineering Manager (or equivalent manager) reviews and signs the Technical Concern Assessment Checklist and initiates the applicable follow-up action.

A file is maintained for checklists and EOEs in the SM office.

(8) <u>Termination of LCO-Affected Operations for Facilities with FSARs that are Non-compliant with DOE Order 5480.23</u>

In the case where remedial/required action requires that LCO-affected operations be terminated, the affected area must be identified. Identification can be accomplished by referring to the AB, the System Evaluation Report (SER), or by processing an EOE if the AB and SER are not specific.

When an item is declared inoperable by the Shift Manager that requires termination, or an OSR/TSR OOT condition occurs requiring termination, or an Authorization Basis violation has occurred, then the SM:

- makes an appropriate SM Log entry and notifies the Facility Manager
- implements the specified remedial/required actions
- updates facility status and informs facility personnel
- reports the condition to DOE as required by 1-D97-ADM-16.01, Occurrence
 Reporting Process, and notifies the DOE Facility Representative
- reports the condition to other managers as applicable, and the Integrating
 Management Contractor Representative for the facility

For cases where a timeframe for remedial/required actions is NOT specified in the applicable Authorization Basis document, action is initiated within thirty (30) minutes.

Appendix 27, Material-at-Risk (MAR) is used as a guideline to conservatively define operations allowed in a facility while out of compliance with the Authorization Basis. Facilities whose Authorization Bases (DOE Order 5480.23 compliant) define non-LCO affected operations or prescribe actions for suspension of LCO affected operations SHALL follow the prescriptions of the Authorization Basis. For facilities with FSARs not DOE Order 5480.23 compliant, Appendix 27 SHALL be used to determine which operations are non-LCO affected.

The actions required in response to BIO/BFO violations are specified in the BIO/BFO documents. If a violation occurs, the Shift Manager will take the required actions specified in the AB and:

- document the time and circumstances in the Shift Manager's Log indicating when/what required actions were taken
- document the termination/suspension in a Technical Operations Order if applicable
- notify on-shift personnel and the Facility Manager
- notify the DOE Facility Representative and the IMC Representative for the facility
- report the occurrence to DOE officially by filing an Occurrence Report in accordance with 1-D97-ADM-16.01
- update facility status

When immediate corrective actions have been taken, and the Fact Finding meeting has occurred, a letter with Appendix 28 and a copy of the Occurrence Notification Report detailing the violation will be sent to the designated IMC Division Manager with:

- 1. short-term and long-term corrective actions to address the violation, identification of root causes, and the restart plan, or
- a report identifying the root causes for the violation and the corrective actions taken and to be taken to prevent recurrence within ten calendar days, as specified in the BIO/BFO for the type of violation

In both cases, the letter will state that Independent Safety Review of the root cause was conducted and short-term corrective actions were accomplished.

If required by the AB for the facility, the designated IMC Division Manager will forward Item 1. for DOE approval, and will forward Item 2. to DOE within sixteen calendar days. After DOE approval for Item 1., the designated IMC Division Manager will notify contractor management by letter of DOE approval to restart. If DOE approval is not required by the AB, the IMC Division Manager will approve restart by letter.

(10) <u>Management of Potential Unreviewed Safety Questions</u>

When information is identified which indicates a potential inadequacy of previous safety analyses, or a possible reduction in the margin of safety is identified as defined in the OSR/TSR such that a potential for a positive USQ exists, then the SM SHALL:

- document the item in the SM Log
- file the required occurrence report
- take action to place the facility in a safe condition. The safe condition is to be identified by implementing a Technical Operations Order until the Unreviewed Safety Question Determination (USQD) is completed
- notify the DOE Facility Representative, contractor management, the IMC
 Representative for the facility, and the Facility Manager of the situation
- initiate a request to perform a Safety Evaluation Screen/Unreviewed Safety Question
 Determination (SES/USQD) in accordance with 1-C10-NSM-04.03, Safety Evaluation
 Screen, or equivalent contractor or subcontractor procedure

If the Facility Manager cannot support concurrence or notification of the preliminary evaluation of the USQD within the required five working days, the Nuclear Engineering

• if directed by the SM, the device may be reset one time

A protective device is not reset a second time unless the cause of the trip is understood and corrected, and has been authorized by the Shift Manager.

Document actions taken in the SM's Log or the SOE Log as appropriate.

8. REFERENCES

	1-15320-HSP-2.08	Lockout/Tagout
	1-C10-NSM-04.03	Safety Evaluation Screen
	1-C11-NSM-04.05	Unreviewed Safety Question Determination
	1-D97-ADM-16.01	Occurrence Reporting Process
٠	MAN-001-SDRM	Site Documents Requirements Manual
	1-MAN-010-S&A	Safeguards and Accountability Manual - General Requirements
	1-MAN-013-SIOM	Site Integrated Oversight Manual
	1-MAN-016-ISM	Integrated Safety Management System Manual
	1-MAN-07-LLGI-RM	Site Lessons Learned Generic Implications Requirements Manual
	1-MAN-018-NSM	Nuclear Safety Manual
	1-R26-NSM-04.06	Justification for Continued Operation (JCO) Preparation
	1-V41-RM-001	Records Management Guidance for Record Sources
	1-PRO-079-WGI-001	Waste Generating Instruction
	PRO-393-SERM-EOE	Engineering Operability Evaluation Report Process
	3-W24-MA-002	Kaiser-Hill Company, L.L.C. Management Assessment

Program

4-B19-NSM 03.12

Operating Limits Validation

Training Users Manual

Stratospheric Ozone Protection Compliance Manual

Nuclear Material Safety Limits and Criticality Safety

	96-RF/T&Q-0005	Training and Qualification Program (part of the Training Users Manual)
	DOE Order 5480.19	Conduct of Operations Requirements for DOE Facilities
	DOE Order 5480.20A	Personnel Selection, Qualification and Training Requirements for DOE Nuclear Facilities
	1-MAN-026	Kaiser-Hill RFETS Security Manual
	MAN-0063-DC	Site Document Control
	MAN-027-SERM	Site Engineering Requirements Manual
	MAN-062-CAUSE ANALYSIS	Cause Analysis Requirements Manual
DCF-001	MAN-072-OS&IH PM	Occupational Safety & Industrial Hygiene Program Manual
2	MAN-071-IWCP	Integrated Work Control Program Manual
	Policy Manual	Kaiser-Hill Company, L.L.C., Policy Manual
	SX-164	Standard for Facility System and Component Identification and Labeling
OCF-001	Site SAR	Rocky Flats Environmental Technology Site Safety Analysis Report
	Tech 15	Defense Nuclear Facilities Safety Board Technical Report, Operational Formality of Department of Energy Nuclear Facilities and Activities
		Rocky Flats Nuclear Material Control and Accountability Plan

MAN-087-AQ02

Pre-Evolution Briefing Record

Page 1 of 4

Evolution Description:					
	lution Supervisor:				
A.	Date/Time of PEB:				
B.	Applicable Procedure Nu	ımber/Work Package	e Number:		
C.	Personnel Attending: (Fi	illed-in here, or attac	ch an attendan	ce roster):	
		·		,	
N	AME EMPLOYEE#	COMPANY	NAME	EMPLOYEE#	COMPANY
					
		•			
	Briefing Check-Off List:			·	INITIALS
1.	The evolution is schedule	ed on the POD.		-	
2.	2. The trainee to operator ratio of trainees is authorized by the FM.				
3.	Evolution Supervisor has conducted a walkdown for new or complex evolutions if not previously dry-run.				
4.	Participants have the procedures, work package, or other documents needed.				

Pre-Evolution Briefing Record Page 2 of 4

5.	The necessary documents are available for use at the PEB and are current (i.e., CSOL/NMSL, MSDS, RWP, procedures, hazards analyses, criticality safety analyses, etc.)
6.	Evolution Supervisor briefed changes to procedures which have

- occurred since the activity was last conducted.
- 7. Necessary personnel are in attendance. Trainee limitations on operating equipment/taking rounds/making log entries discussed.
- 8. The scope of the evolution to be performed including LO/TO requirements and responsibilities of each individual were identified and discussed. Procedure covered in sufficient detail to ensure participants understand the evolution, and their role. If multiple work groups are involved with interfacing activities, specific work scopes, interfacing procedures, and coordination of the groups discussed. If moving drums or containers with radioactive material, the CSO is involved in the evolution, or an exemption granted by the SM.
- 9. The current facility conditions, impacts of other evolutions, and impacts of this evolution on ongoing work discussed with SM.
- 10. The precautions, limitations, initial conditions, and prerequisites were reviewed.
- 11. Adequate communications are available, are operable, and periodic operability checks are discussed.
- 12. The required tools and equipment are available.
- 13. Portable instruments are calibrated (if required).
- 14. Personnel taking, receiving, or transmitting data are familiar with the data requirements.
- 15. Expected instrument readings discussed (if applicable).
- 16. Appropriate log sheets, material transfer, and data recording forms are available.
- Discuss expected IDCs, and action to take if other IDCs are encountered. Radiological hold points discussed.

Pre-Evolution Briefing Record Page 3 of 4

	Page 3 of 4	
18.	Are hazardous materials (e.g., substance, wastes, or chemicals) present? [] YES [] NO (if answer is no, continue the briefing check-off list. If yes, complete and discuss Appendix 5, Hazardous Material Release Prevention/Preparedness Checklist, and continue the briefing check-off list).	-
19.	Hazards associated with the evolution and PPE/safety equipment discussed. Location of eyewash, safety showers, and spill kits discussed (<i>if applicable</i>); heat stress/cold stress briefing per Chapter 16, Occupational Safety & Industrial Hygiene Program Manual (<i>if applicable</i>).	
20.	Applicable sections of the Waste Generating Instruction have been discussed. Waste Generator qualified personnel available.	
21.	Dosimetry and radiological conditions have been discussed including the RWP(s), expected contamination levels, expected exposure levels, use of TLDs and EPDs, and postings. Discuss neutron/gamma ratio for applicable jobs.	
22.	Special radiological control requirements from the applicable ALARA review and RWP have been discussed. Methods to minimize exposure discussed.	
23.	Radiological limiting conditions that would void the RWP (<i>if applicable</i>) have been discussed, including methods to minimize exposure. RWP suspension limits discussed/actions to take discussed.	
24.	Criticality safety discussed. CSO assists for new activities.	
25.	Actions to be taken in the event of emergencies or upsets, or if operating limits are exceeded, discussed. (fire, criticality, glovebox overheat, SAAM/CAM alarm, CSOL limits, etc.).	
26.	Recent past problems, changes, unusual events, lessons learned, and occurrences relative to the evolution discussed.	
27.	Potential shift changes, watch reliefs and breaks discussed.	
28.	Applicable NMSLs and CSOLs discussed. NSM 3.12 assignment made. Reminder made that satisfactory 3.12 is	

reported to the Evolution Supervisor prior to activity start, and changes requiring another NSM 3.12 discussed.

Pre-Evolution Briefing Record Page 4 of 4

	Fage 4 01 4	
29.	Open criticality infractions which impact the evolution are discussed. Discuss MAR control (<i>if applicable</i>); steps to take if exceeded.	
30.	Egress procedures and egress routes and assembly areas discussed.	
31.	Unique postings in the work area discussed.	
32.	Escort requirements discussed and escort assignments made. Responsibilities for OJT instructors to directly supervise trainees reemphasized.	
33.	Provisions for housekeeping and final clean-up discussed.	
34.	Open-ended questions asked to ensure participants understand the evolution and are aware of hazards involved, hazard controls, and responses expected during the evolution. Procedural compliance requirements, and stop-work authority of individuals discussed. Solutions to barriers impeding safe/efficient work discussed.	
35.	All questions have been adequately answered.	
36.	A summary of the evolution discussed; watches synchronized if applicable.	

Evolution Supervisor

Date

DCF-001 DCF-001

DOE Order 5480.19 Crosswalk Matrix

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DOE ORDER 5480.19	FORMERLY IMPLEMENTED BY: NOW IMPLEMENTED BY:	y de la company
GUIDELINE		

Chapter 1, Operations Organization and Administration

C.1 Operations Policies	COOP 001, Sections 4,5 COOP 002-017, Section 4 in each COOP 020, Section 4	COOP Sections 2, 3.A, 4.A Kaiser-Hill Policy Manual RFETS Security Manual Master Safeguards and Security Agreement (MSSA)
C.2 Resources	COOP 001, Sections 4.4.2.3, 4.4.2, and 5.2	COOR Sections 2.F, 6.A, 6.B
C.3 Monitoring of Operating Performance	COOP 001, Sections 4.4, 4.5, 4.7 Sections 5.1, 5.3, 5.6 COOP 002 COOP 012, Section 5.3 1-G64-ADM-21.01 QA Surveillance 1-A65-ADM-15.01 Control of Non-Conforming Items 1-A65-ADM-15.03 Deficiency Report System 1-74000-IWCP-TOC Deficiency Control Procedure 1-C78-ADM-16.05 Implementation of Lessons Learned 1-11000-ADM-16.06 Conduct of Critiques	COOP Sections 2.E, 2.F, 2.G, 2.H, 2.I, 5.G, 5.H 1-D97-ADM-16.01 Occurrence Reporting Process Corrective Action Procedures Manual 1-MAN-013-SIOM Site Integrated Oversight Manual
C.4 Accountability	COOP 001, Sections 4.4, 5.1 Performance Review System	COOP Section 2.E Kaiser-Hill Team Standards of Conduct; Performance Review System
C.5 Management Training	COOP 001, Section 5.2.3 Training User's Manual (TUM)	COOP Section 6.C Training User's Manual (TUM)
C.6 Planning for Safety	COOP 001, Section 5.1.7 COOP 011, Section 5.3 HSP Manual 2.03, 5.01	COOP Sections 2, 4.A, 4.B-C MAN-072-OS&IH Manual Integrated Safety Management System Manual Nuclear Safety Manual, 1-NSM



DOE ORDER 5480.19 | FORMERLY IMPLEMENTED BY:

NOW IMPLEMENTED BY:

APPENDIX 33

DOE Order 5480.19 Crosswalk Matrix

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	GUIDELINE				
	Chapter 2, Shift Ro	Chapter 2, Shift Routines and Operating Practices			
	C.1 Status Practices	COOP 001, Section 5.4 COOP 004, Sections 4, 5 COOP 005, Section 6 COOP 012, Sections 4, 5	COOP Sections 2, 5.B, G, 7.A, B, F, H, I, J		
DCF-001	C.2 Safety Practices	COOP 001, Section 5.1 COOP 012, Section 5.2 HSP Manual	COOP Sections 4.A, 4.B, 4.C COOP Appendix 19 MAN-072-OS&IH Manual ISMS Manual		
	C.3 Operator Inspection Tours	COOP 001, Section 5.3.8 COOP 001, Section 4.5.5 COOP 006, Section 5.2 COOP 007, Section 5 COOP 012, Section 5	COOP Sections 2.G, I, J, 4.D, 5.B, G		
	C.4 Round/Tour Inspection Sheets	COOP 001, Section 5.3.8 COOP 006, Section 5.2 COOP 007, Section 5.2 COOP 012, Section 5.1, 5.3	COOP Section 5.G COOP Appendix 19		
DCF-001	C.5 Personnel Protection	COOP 001, Sections 4.5, 5.1, 5.2 COOP 011 COOP 016, Section 5.1 HSP Manual	COOP Sections 2.I, 2.J, 4.A, 4.C MAN-072-OS&IH Manual Training User's Manual (TUM) RadCon Manual		
	C.6 Response to Indications	COOP 001, Sections 5.4.4	COOP Sections 7.I, J, K		
	C.7 Resetting Protective Devices	COOP 001, Section 5.4.13	COOP Section 7.M		
Q.	C.8 Load Changes	Not Applicable	Not Applicable		
DCF-001	C.9 <u>Authority to Operate</u> <u>Equipment</u>	COOP 001, Sections 4.4, 4.5, 5.3, 5.4, 5.6 Training User's Manual (TUM)	COOP Sections 2.G, 4.C, 4.E, 2.J		

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APPENDIX 33

DOE Order 5480.19 Crosswalk Matrix

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DOE ORDER 5480.19 FORMERL	Y IMPLEMENTED BY:	NOW IMPLEMENTE	D BY:
GUIDELINE			

Chapter 2, Shift Routines and Operating Practices (Continued)

C.10 Shift Operating Bases	COOP 001, Section 5.3.3.8 COOP 004 COOP 007	COOP Sections 4.D, 5.B
C.11 Potentially Distractive Written Material and Devices	COOP 001, Sections 4.5.3, 5.3.3.9	COOP Section 4.D

Chapter 3, Control Area Activities

C.1 Control Area Access	COOP 001, Section 5.3.3.8	COOP Section 4.D
C.2 Professional Behavior	COOP 001, Sections 5.1.3, 5.3.3.8, 5.3.3.9	COOP Sections 4.D, 3.A, 2.I, 2.J
C.3 Monitoring the Main Control Boards	COOP 001, Sections 5.3, 5.4, 5.6	COOP Sections 2.J, 4.D, 7.I, J, K
C.4 Control Operator Ancillary Duties	COOP 001, Sections 4.5.3, 4.6.3	COOP Section 4.D
C.5 Operation of Control Area Equipment	COOP 001, Section 5.3.3.4 COOP 003, Section 5.4 Training User's Manual	COOP Sections 1.B, 6.C

Chapter 4, Communications

C.1 Emergency Communications	COOP 001, Sections 4.4.6, 4.5.2 COOP 015 EPLAN-94 (RFETS Emergency Plan)	COOP Section 5.F
System		

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DOE ORDER 5480.19 GUIDELINE	FORMERLY IMPLEMENTED BY:	NOW IMPLEMENTED BY:
	ınications (Continued)	The second secon
C.2 Public Address System	COOP 015, Section 4.1, 5.5.3 EPLAN-94	COOP Section 5.F
C.3 Contacting Operators	COOP 001, Section 5.3.6 COOP 015, Section 5 EPLAN-94	COOP Section 5.F
C.4 Radios	COOP 015, Section 5.5.2 EPLAN-94	COOP Section 5.F
C.5 Abbreviations and Acronyms	COOP 015, Section 5.1	COOP Section 5.F
C.6 Oral Instructions and Informational Communication	COOP 001, Section 5.3.6 COOP 015, Sections 5.3, 5.5	COOP Section 5.F COOP Appendix 17
Chapter 5, Control	of On-Shift Training	*
C.1 Adherence to Training Programs	COOP 001, Section 5.2 COOP 003, Control of On-Shift Training EPLAN-094 (RFETS Emergency Plan)	COOP Section 6.C Training User's Manual (TUM)
C.2 On-Shift Instructor Qualifications	COOP 003, Sections 4.1, 4.2, 4.5, 5.1 Training User's Manual (TUM)	COOP Section 6.C Training User's Manual (TUM)
C.3 Qualified Operator Supervision and Control of Trainees	COOP 003, Sections 4.1, 4.3, 5.3, 5.4, 5.5 COOP 012, Section 5.3.2 Training User's Manual (TUM)	COOP Section 6.C
C.4 Operator Qualification Program Approval	COOP 001, Section 5.2.3 COOP 003, Section 4.1 Training User's Manual (TUM)	COOP Section 6.C Training User's Manual (TUM)

DOE Order 5480.19 Crosswalk Matrix

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DOE ORDER 5480.19 FORMERLY IMPLEMENTED B	Y:	NOW IMPLEMENTED BY:	
GUIDELINE			,

Chapter 5, Control of On-Shift Training (Continued)

C.5 Training Documentation	COOP 003, Sections 5.6, 6.1 Training User's Manual (TUM)	COOP Section 6.C Training User's Manual (TUM)
C.6 Suspension of Training	COOP 001, Section 5.3.3.4.4 COOP 003, Section 5.5.1	COOP Section 6.C
C.7 Maximum Number of Trainees	COOP 003, Section 5.4.4 Training User's Manual (TUM)	COOP Section 4.C(3) COOP Section 6.C Appendix 4

Chapter 6, Investigation of Abnormal Events

C.1	COOP 001, Sections 5.6.1, 5.6.2, 5.6.3	1-D97-ADM-16.01
Events Requiring	1-D97-ADM-16.01	COOP Section 4.E
Investigation	Occurrence Reporting Process	COOP Section 2.G
	1-11000-ADM-16.03	COOP Section 2.H
	Cause Analysis	
	1-C78-ADM-16.05	For Nuclear Facilities:
	Implementation of Lessons Learned	1-MAN-022-PAAAPROG
	1-11000-ADM-16.06	Price-Anderson Amendments Act
	Conduct of Critiques	Program Manual
C.2	COOP 001, Sections 4.4, 4.5, 5.6.2, and 5.6.3	1-D97-ADM-16.01
Investigation	1	MAN-062-CAUSE ANALYSIS
Responsibility		
C.3	COOP 001, Section 5.6.3	1-D97-ADM-16.01
Investigator	1-D97-ADM-16.0	MAN-062-CAUSE ANALYSIS
Qualification	1-11000-ADM-16.0	
	1-11000-ADM-16.06	
C.4	COOP 001, Section 5.6.3	1-D97-ADM-16.01
Information to be	1-15200-EPIP-04.01	MAN-062-CAUSE ANALYSIS
<u>Gathered</u>	Emergency Classification	
	1-D97-ADM-16.01	
	1-11000-ADM-16.03	
	1-C78-ADM-16.05	
	1-11000-ADM-16.06	

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Chapter 6, Investigation of Abnormal Events (Continued)

C.5 Event Investigation	COOP 001, Section 5.6.3 1-D97-ADM-16.01 1-11000-ADM-16.03 1-C78-ADM-16.05 1-11000-ADM-16.06	1-D97-ADM-16.01 MAN-062-CAUSE ANALYSIS
C.6 Investigative Report	1-D97-ADM-16.01 1-11000-ADM-16.03 1-C78-ADM-16.05 1-11000-ADM-16.06	1-D97-ADM-16.01 MAN-062-CAUSE ANALYSIS For Nuclear Facilities: 1-MAN-022-PAAAPROG
C.7 Event Training	COOP 001, Sections 5.6.2, 5.6.3 COOP 003, Section 5.3.3	COOP Section 2.F; 2E 1-MAN-017-LLGI-RM Site Lessons Learned/Generic Implications Requirements Manual
C.8 Event Trending	1-D97-ADM-16.01 1-11000-ADM-16.03 1-C78-ADM-16.05	COOP Section 2.F; 2E 1-E93-ADM-16.18 Data Analysis and Trending for Performance Improvement For Nuclear Facilities: 1-MAN-022-PAAAPROG
C.9 <u>Sabotage</u>	Safeguards and Security Program Master Safeguards and Security Agreement (MSSA) Site Security Manual Protective Force Security Emergency Response Plan	RFETS Emergency Plan (EPLAN-97) and Building Emergency Plans

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DOE ORDER 5480.19 FORMER	RLY IMPLEMENTED BY:	NOW IMPLEMENTED BY:
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Chapter 7, Notifications

Chapter 7, Notific	<u>ations</u>	
C.1 Notification Procedures	COOP 001, Sections 5.6.2, 5.6.3 1-D97-ADM-16.01	COOP Section 1.G, 5.F 1-D97-ADM-16.01 RFETS Emergency Plan (EPLAN-97) and Building Emergency Plans Emergency Classification and Protective Actions 1-PRO-T56-EP-04.00
C.2 Notification Responsibility	COOP 001, Sections 4.4.6, 4.5.5 1-D97-ADM-16.01	COOP Section 5.F 1-D97-ADM-16.01 RFETS Emergency Plan (EPLAN-97) and Building Emergency Plans 1-PRO-T56-EP-04.00, Emergency Classification and Protective Actions
C.3 Names and Phone Numbers	COOP 001, Section 5.2.1.5 1-D97-ADM-16.01	COOP Section 5.F RFETS Emergency Plan (EPLAN-97) and Building Emergency Plans 1-PRO-T56-EP-04.00, Emergency Classification and Protective Actions
C.4 Documentation	COOP 001, Section 5.6.3 1-D97-ADM-16.01	COOP Section 5.F, 5.G 1-D97-ADM-16.01 RFETS Emergency Plan (EPLAN-97) and Building Emergency Plans 1-PRO-T56-EP-04.00, Emergency Classification and Protective Actions
C.5 Communication Equipment	COOP 015, Sections 5.5, 5.6	COOP Section 5.F RFETS Emergency Plan (EPLAN-97) and Building Emergency Plans

APPENDIX 33

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DOE ORDER 5480.19 GUIDELINE	FORMERLY IMPLEMENTED BY:	NOW IMPLEMENTED BY:
Chapter 8, Contro	of Equipment and System Status	
C.1 Status Change Authorization and Reporting	COOP 001, Sections 4.5, 5.4 COOP 007 COOP 011 COOP 020	COOP Sections 2.G, 2.J, 4.B,C, 5.B,F, 7.A,B,F,G,K,L
C.2 Equipment and System Alignment	COOP 001, Section 5.4 COOP 004, Section 5.4 COOP 006 COOP 014	COOP, Sections 7.A, 7.H
C.3 Equipment Locking and Tagging	COOP 001, Section 5.4.8 Health and Safety Practices Manual HSP 2.08	COOP Section 7.D HSP 2.08
C.4 Operational Limits Compliance	COOP 001, Section 5.4 COOP 005, Authorization Bases Tracking COOP 006 COOP 007 COOP 020, Termination of Operations	COOP Section 7.C COOP Section 3.B COOP Section 7.G COOP Section 5.B COOP Section 5.G
C.5 Equipment Deficiency Identification and Documentation	COOP 001, Section 5.4.9 1-74000-IWCP Deficiency Report and Work Request Procedure COOP 008	COOP Sections 4.D, 5.B, G, H, 7.A, D, G, L 1-74000-IWCP TOC Integrated Work Control Program Manual
C.6 Work Authorization and Documentation	COOP 001, Sections 4.5, 5.4 COOP 016 1-74000-IWCP	COOP Sections 2.G, 4.A, 4.B, 7.A
C.7 Equipment Post Maintenance Testing and Return to Service	COOP 001, Section 5.4 1-74000-IWCP 1-90953-CCCP Configuration Change Control Process	COOP Section 7.G 1-7400-IWCP-TOC Integrated Work Control Program Manual
C.8 Alarm Status	COOP 001, Section 5.4 COOP 004 COOP 012 COOP 017	COOP Section 7.L

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	DOE ORDER 5480.19 GUIDELINE	FORMERLY IMPLEMENTED BY:		NOWIMPLEMENTED BY:
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Chapter 8, Control of Equipment and System Status (Continued)

C.9 Temporary Modification Control	COOP 006, Section 5.4 2-D16-COEM-DES-207 Conduct of Engineering Manual 1-90953-CCCP	COOP Section 4.F
C.10 <u>Distribution and</u> <u>Control of Equipment</u> <u>and Systems</u> <u>Documents</u>	COOP 001, Section 5.4 1-77000-DC-001 Document Control Program	MAN-001-SDRM Conduct of Engineering Manual MAN-0063-DC Site Document Control Program

Chapter 9, Lockouts and Tagouts

<u> </u>	tis and ragouts	
C.1 Lockout and Tagout Use	COOP 001, Section 5.4.8 Health and Safety Practices Manual (Lockout/Tagout), HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual COOP Section 7.D
C.2 Lockout and Tagout Implementation	COOP 001, Section 5.4.8 Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
C.3 <u>Protective Materials</u> <u>and Hardware</u>	COOP 001, Section 5.4.8 Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
C.4 <u>Lockout/Tagout</u> <u>Program</u>	COOP 001, Section 5.4.8 Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
C.5 Procedures for Lockout/Tagout	COOP 001, Section 5.4.8 Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
C.6 Application of Lockout/Tagout	COOP 001, Section 5.4.8 Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual

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	DOE ORDER 5480.19 GUIDELINE	FORMERLY IMPLEMENTED BY:	NOW IMPLEMENTED BY:
	Chapter 9, Lockouts and Tagouts (Continued)		
DCF-001	C.7 Testing or Positioning of Equipment or Components	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
10	C.8 Periodic Inspections	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
DCF-001	C.9 Caution Tags	COOP 001, Section 5.4.9 COOP 008	COOP Section 7.D Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
DCF-001	C.10 Training and Communications	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
	C.11 Lockout or Tagout Implementation	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
DCF-001	C.12 Notification of Personnel	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
	C.13 Outside Contractors	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
DCF-001	C.14 Group Tagouts or Lockouts	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual
	C.15 Shift or Personnel Changes	Health and Safety Practices Manual HSP 2.08	Health and Safety Practices Manual HSP 2.08 or Chapter 9, MAN-072- OS&IH Manual

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Examples of Administrative Operations Orders include those written for the benefit of the building personnel to clarify and organize other orders and procedures. Although an Administrative Operations Order may have technical content, it remains only administrative in nature and does not allow for performance of physical work (*such as valve and equipment operations or electrical lineups*).

- Interim Operations Order A Technical Operations Order issued by the Facility Manager before all of the external reviews are completed. The urgency of the Interim Operations Order is such that implementation is required for safety concerns before the review process is completed. The decision for the urgency is the responsibility of the Facility Manager.
- Technical Operations Order An Operations Order that has technical content based on an evaluation performed in accordance with the Operations Order Evaluation Checklist.

 Technical Operations Orders require external review, and meet IWCP Program Manual requirements in Chapter 7 when being developed.

<u>Operator Aid Postings</u> Information posted to assist operations and support personnel in performing their duties. Methods of posting include copies of approved procedures (*pages or portions*), system drawings, graphs, and curves.

<u>Out-of-Commission (OOC)</u> The terminology used for equipment, components, or systems when they are removed from service and no future use or mission is identified. OOC equipment, components, and systems may be retired in place.

<u>Out-of-Service (OOS)</u> The equipment or system is required to support the current mission by a facility and cannot, or should not, be operated until corrective maintenance is completed. Restoration to service is intended.

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<u>Pre-Evolution Briefing (PEB)</u> A complete briefing of the work necessary to perform an approved evolution, including discussion of procedures, hazards, safety precautions, controls, expected upsets and anomalies, emergency response, and other items relevant to the evolution.

<u>Qualified Staff Member</u> An individual on the Facility Manager's staff whom the Facility Manager deems capable, competent, conscientious, and who is considered to have the expertise on the subject matter (a Subject Matter Expert (SME)).

<u>Round Sheets</u> Controlled sheets used by operations personnel to collect data, record equipment status, note unusual conditions, and note trends.

<u>Safety Structures, Systems, and Components</u> See the Nuclear Safety Manual.

<u>Shift Order</u> A document that communicates timely information that is pertinent for only a short time from the Facility Manager to the shift operations personnel. Information may include such items as impending procedure changes, equipment changes, or notification of work priorities, upcoming evolutions, and facility visits.

Spurious Alarm An alarm that actuates for other than its designed intent.

Standing Order A document issued by senior management that provides administrative guidance or instruction applicable to the Site.

<u>Telephone Concurrence (Telcon)</u> Document approval or concurrence received by telephone.